



Essex Zoning Board of Appeals
29 West Avenue
Essex, CT 06426
860-767-4340 x 115 Fax 860-767-8509
www.essexct.gov

Application Instructions and Procedures

REGULAR MEETINGS of the Board are held on the third Tuesday of each month at **8:00 p.m.** at the Essex Town Hall, Room B.

Applications filed by the end of the business day on the second Friday of each month will be scheduled for a public hearing at the next month's meeting date. **The applicant must submit the original plus 11 copies of the complete application, including a plot plan and two (2) checks in the following amounts:**

\$40.00 Application Fee payable to The Town of Essex

\$30.00 Department of Environmental Protection Fee payable to The Town of Essex

Plans shall be drawn to scale, accurately showing lot dimensions, area, setback dimensions, location and size of all existing and proposed buildings on the property, the existing and intended use of each building or part of a building, the number of families or housekeeping units that the buildings are designed to accommodate. The names, mailing addresses of the adjoining property owners, (including the Assessors Map and Lot No. for each property) and such other information as may be necessary to define the questions involved.

Plans accompanying applications pertaining to gasoline stations, garages, auto showrooms, and parking lot(s) shall also include the location of any pumps and shall show height and size of any addition to location, height and intensity of lights, planting, curbs, sidewalks, street lines, and entrances. Applications pertaining to gasoline filling stations, gas pumps, repairer's or licenses and motor vehicle junk yards must be accompanied by Connecticut Department of Motor Vehicle forms to be signed by the Board.

Application for Variance of the sections pertaining to liquor outlets shall be accompanied by 11 copies of a map showing the location of other outlets within 1500 feet.

IF GEOGRAPHICAL CONDITIONS are claimed as hardship, applications shall be accompanied by photographs or topographical survey showing same.

Appellant or his agent must be present at Hearing and must be prepared to show in full circumstance/hardship which he claims justify the granting of the applications. The hardship must not be based on personal or financial circumstance.

If application for re-hearing, the appellant must allege new facts and prove same at the Board meeting.

THE BOARD IN ITS DISCRETION MAY DISMISS AN APPEAL (WITHOUT PREJUDICE) FOR FAILURE TO COMPLY WITH ANY OF THE FOREGOING RULES.

Stuart Ingersoll
Chairman

Application Fee: \$40.00

DEP Fee: \$30.00

Both checks payable to The Town of Essex

Revised 5/18/2006

ESSEX ZONING BOARD OF APPEALS APPLICATION

29 West Avenue, Essex, CT 06426

860-767-4340 X 115 - essexct.gov

It is incumbent upon the applicant to include with this application, a current list of abutting property owners and a plan which depicts the setback lines. See Instructions and procedures sheet attached. Fees payable at the time of application.

Date: _____

Lot No.: _____

Map No. _____

Zone: _____

Application for Variance of the Zoning Regulations, Certificate of Approval of Location or Appeal from the Decision of the Zoning Enforcement Agent.

Applicant (please print): _____

Address: _____

Street

Town

Zip

Phone No.: _____

Interest in Property: ☐ Owner ☐ Agent ☐ Appellant ☐ Purchaser

Name of Owner (please print): _____

Address of Owner: _____

Street

Town

Zip

To the Board of Appeals:

- 1) ____ hereby apply for: ☐ Variance ☐ Certificate of Approval of Location
☐ An appeal of a Decision of the ZEA

2) Premises located at No: _____

3) Previous application(s) have been made for this property: _____

4) Previous application(s) #'s.: _____ Date: _____

5) Variance(s) requested of the Zoning Regulations:

6) Use to be made of the property if variance is granted:

7) Strict application of the Zoning Regulations would produce unusual hardship or exceptional difficulty

because: _____

8) Conditions on this property are unique because: _____

9) Is the property located within the Gateway Conservation District? ☐ Yes ☐ No

10) Is the property within 500 feet of any other municipality? ☐ Yes ☐ No

11) Applicant must provide a current list of all names and address (show mailing address also if different) of abutting property owners. Attach a separate sheet if necessary.

<u>Name:</u>	<u>Address</u>	<u>Town</u>	<u>Zip Code</u>
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Signature of Owner, Appellant or Agent

Date

Official Use Only

Date Received: _____

Case No. _____

Fees: _____